

Important Advances in Clinical Medicine

The Scientific Board of the California Medical Association presents the following inventory of items of progress in clinical medicine. Each item, in the judgment of a panel of knowledgeable physicians, has recently become reasonably firmly established, both as to scientific fact and important clinical significance. The items are presented in simple epitome and an authoritative reference both to the item itself and to the subject as a whole is generally given for those who may be unfamiliar with a particular item. The purpose is to assist the busy practitioner, student, research worker or scholar to stay abreast of these items of progress in clinical medicine which have recently achieved a substantial degree of authoritative acceptance, whether in his own field of special interest or another.

The items of progress listed below were selected by the Advisory Panel to the Section on Internal Medicine of the California Medical Association and the summaries were prepared under its direction.

Reprint requests to: Division of Scientific and Educational Activities, 693 Sutter Street, San Francisco, Ca. 94102

Vasopressin Test for Assessment of Integrity of Pituitary-Adrenal Axis

The vasopressin test offers a new and easier method for the assessment of integrity of the pituitary-adrenal axis. Vasopressin is similar in action to corticotropin-releasing factor which is normally manufactured in the hypothalamus and acts on the pituitary to cause it to produce ACTH. The test is performed by injecting 10 units of aqueous vasopressin (Parke, Davis & Company) intramuscularly. Plasma cortisol is determined immediately before and one hour after the vasopressin injection. If the pituitary is intact the plasma cortisol concentration in the one-hour specimen should be twice that of the baseline specimen.

GRANT GWINUP, M.D.

REFERENCE

Gwinup G: A test for pituitary function using vasopressin. *Lancet* 2:572-3, 1965

Diagnostic Application of Immunoglobulin Determinations

The simplicity with which immunoglobulins may now be measured through radial immunodiffusion techniques has led to rapid accumulation of knowledge concerning changes in immunoglobulins in a host of clinical disorders. Absolute values of the specific γ -globulin deficiencies in instances of hypogammaglobulinemia may be readily determined by radial immunodiffusion and replacement therapy appropriately determined. In the hyperglobulinemic disorders (e.g., myeloma and macroglobulinemia), the effectiveness of such therapeutic modalities as chemotherapy and plasmapheresis can be similarly followed. Chronic infections and several other "reactive" disorders (e.g., auto-immune diseases) characteristically show increased γ G levels. Changes in γ A-globulin levels are specifically noted in Laennec's cirrhosis where the levels are